Application Data She t

Application Information

Application number:: Filing Date:: 08/04/03 Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R??:: Number of CD disks:: Number of copies of CDs:: Sequence Submission:: Computer Readable Form (CRF)?:: Number of copies of CRF:: Title:: **NOVEL G-PROTEIN COUPLED RECEPTORS** Attorney Docket Number:: 018781-004721US Request for Early Publication:: No Request for Non-Publication:: No Suggested Drawing Figure:: Total Drawing Sheets:: 3 Small Entity?:: No Latin name:: Variety denomination name:: Petition included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers One:: Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Scott

Middle Name::

Family Name::

Powers

Name Suffix::

City of Residence::

Greenlawn

State or Province of Residence::

NY

Country of Residence::

US

Street of Mailing Address::

6 Westbrook Court

City of Mailing Address::

Greenlawn

State or Province of mailing address::

NY

Country of mailing address::

Postal or Zip Code of mailing address:: 11740

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Jianxin

Middle Name::

Family Name::

Yang

Name Suffix::

City of Residence::

Commack

State or Province of Residence::

NY

Country of Residence::

US

Street of Mailing Address::

5 Rimlet Drive

City of Mailing Address::

Commack

State or Province of mailing address::

NY

Country of mailing address::

Postal or Zip Code of mailing address:: 11725

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Gene

Middle Name::

Family Name::

Cutler

Name Suffix::

City of Residence::

San Francisco

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

1935 Franklin Street, #705

City of Mailing Address::

San Francisco

State or Province of mailing address::

CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94109

Correspondence Information

Correspondence Customer Number::

20350

Representative Information

Representative Customer Number::

20350

Domestic Priority Information

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This Application

Division of

09/546,986

04/11/00

09/546,986

Continuation-in-part of

09/524,730

03/14/00

Foreign Priority Information

Country:: App

Application number::

Filing Date::

Assignee Information

Assignee Name:: Tularik Inc.

Street of mailing address:: 1120 Veterans Boulevard

City of mailing address:: South San Francisco

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94080